

**FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) PHILINDA A. YOUNG **(2)** 454-5436
Candidate, Committee or Party Name PHONE #

(3) 7125 LAKERIDGE CT. #119 Fort Myers, Fl. 33907
Address (number and street) City State Zip Code

Check box if address has changed since last report

FINAL REPORT

(4) Check appropriate **box(es)**:

Candidate (office sought) : SUPERVISOR OF ELECTIONS

Political Committee Check if PC has DISBANDED

Committee of Continuous Existence Check if CCE has DISBANDED

Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 7 / 1 / 00 To 8 / 7 / 00 Report Type FINAL

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$, 59 . 00

Loans \$, .

Total Monetary \$, 59 . 00

Non-kind \$ - | -) - . -

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$, 131 . 58

Transfers to Office Account \$, .

Total Monetary \$, 131 . 58

(8) Other Distributions \$, .

(9) TOTAL Monetary Contributions to Date

\$, 2 , 509 . 00

(10) TOTAL Monetary Expenditures to Date

\$, 2 , 509 . 00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct and complete

PHILINDA A. YOUNG

Name of Treasurer Deputy Treasurer

Philinda A. Young
Signature

I certify that I have examined this report and it is true, correct and complete

PHILINDA A. YOUNG

Name of Candidate Chairman (PC/PTY Only)

Philinda A. Young
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Philinda A. Young

(2) PHONE # 454-5436

(3) Cover ~~7~~ 100 through 8 / 7 / 00

(4) Page 2 of 3

| (5) Date | (6) Sequence Number | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor | | (9) Contribution Type | (10) In-kind Description | (11) Amendmen | (12) Amount |
|-------------|---------------------------|--|--------------------|---------------|-----------------------------|--------------------------------|------------------|----------------|
| | | | Type | Occupation | | | | |
| /// | 7/1/00 | GBSI 1151 Charles Terr Fort Myers, Fl. 339c (refund of overpaymer | B) | MAIL HOUSE | REF | | | 3.00 |
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FINAL REPORT

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Philinda A. Young

(2) PHONE # 454-5436

(3) Cover Period - 7 / 1 / 00 - through - 8 / 7 / 00 -

(4) Page 3 of 3

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Purpose (add off ice sought if contribution to a candidate) | (9) Expenditure Type | (10) Amendment | (11) Amount |
|------------------------------|--|---|----------------------------|-------------------|----------------|
| <u> / / </u> 7/1/00 | Bank of America South Cleveland Ave. Fort Myers, Fl. 33907 | service fee | <i>MON</i> | | 15.00 |
| <u> / / </u> 8/1/00 | Bank of America South Cleveland Ave. Fort Myers, Fl. 33907 | Service fee | <i>MON</i> | | 15.00 |
| <u>8/ / 7/00</u> | Philinda A. Young 7125 Lakeridge Ct. #119 Fort Myers, Fl. 33907 | Repayment of Loan | <i>MON</i> | | 101.58 |
| <u> / / </u> | | | | | |
| <u> / / </u> | | FINAL REPORT | | | |
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AUG 7 12 24 PM '00
 SUPERVISOR